

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | W | 71525 | 12-15-99 |
| O.I.P.E. CLASSIFIER | | 8 | 12-29-99 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 59158 | 1-19-2000 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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